



STATE OF WASHINGTON

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S. Evergreen Park Dr. S.W., P.O. Box 47250 • Olympia, Washington 98504-7250  
(360) 664-1160 • TTY (360) 586-8203

March 10, 2006

**Subject: Your Class C Water Annual Report and Regulatory Fees are Due May 1**

State law requires you to file an annual report and pay regulatory fees to the Washington Utilities and Transportation Commission.

**What is required of me?**

By May 1, you must:

- Complete and file the enclosed 2005 annual report form
- Pay your 2006 regulatory fees

Failure to file your annual report or pay regulatory fees by May 1 may result in a penalty. This is the only notice you will receive from the commission.

**What happens if I do not pay my regulatory fees by May 1?**

If regulatory fees are not paid by May 1, you will incur:

- a 2 percent penalty on the amount due; and
- a 1 percent monthly interest charge on the unpaid balance.

**Can I request an extension of time if I am unable to file the annual report by May 1?**

Yes, you must provide the request in writing, including a valid reason for the extension by May 1. We will notify you when your request is approved or denied. You will still be liable for penalty and interest payments if you fail to pay your regulatory fees by May 1. If you are late filing your annual report or fail to file, you could incur additional penalties up to \$100 a day.

**Where do I mail the completed annual report form and regulatory fee payment?**

Washington Utilities and Transportation Commission  
PO Box 47250  
Olympia, WA 98504-7250



March 10, 2006  
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**Where can I obtain an electronic version of the annual report?**

Forms are available on our website at [www.wutc.wa.gov](http://www.wutc.wa.gov). Locate "Quick Links" then select "2005 annual reports".

**Who do I contact if I have questions?**

You may call 360-664-1201 or e-mail us at: [annualreports@wutc.wa.gov](mailto:annualreports@wutc.wa.gov). If you need this information in an alternate format, please call 360-664-1133. TTY Toll Free phone number is 1-800-416-5289 or 360-586-8203.

Sincerely,

A handwritten signature in black ink, appearing to read "Carole J. Washburn". The signature is fluid and cursive, with the first name "Carole" being more prominent.

Carole J. Washburn  
Executive Secretary

Enclosures

# CLASS C - WATER COMPANIES

## ANNUAL REPORT

Full name and address of Company

Correct name and address, if different than shown

**WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION**  
**for the**  
**YEAR ENDED DECEMBER 31, 2005**

**Inquiries concerning this Annual Report should be addressed to:**

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

**The company must notify the Commission, in writing, of any changes to the above information.**

<b>TYPE OF PAYMENT - DO NOT SEND CASH IN THE MAIL</b>  ___ Check   ___ Money Order   ___ AMEX   ___ Visa   ___ MasterCard	<b>For Commission Use Only</b>  <b>Credit Card Authorization #:</b> _____																					
<b>Credit Card Number:</b> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> <td style="width: 20px; height: 30px;"></td> </tr> </table>																						
<b>Expiration Date</b> <b>Month/Year</b>																						

**CERTIFICATION:** I, the undersigned, under penalty for false statement, certify that the information is true, valid and correct, that I am authorized to execute on behalf of the applicant, and that I agree to pay the above total amount according to card issuer agreement.

Name (Printed) _____	Title _____
Signature _____	Date _____

<i>For Commission Use Only</i>		
Reception Number: _____	001-11-02-68-160-11: _____	Reference Number: _____
001-111-02-68-160-01: _____	001-111-02-68-032-05: _____	

Original to be mailed to the Washington Utilities and Transportation Commission, PO Box 47250, Olympia, WA 98504-7250  
Web Site: [www.wutc.wa.gov](http://www.wutc.wa.gov)

Washington Unified Business Identifier (UBI) No.: \_\_\_\_\_  
(If you do not know your UBI No. please contact the Department of Licensing at 360-664-1400)

### **CERTIFICATION**

I certify that I, \_\_\_\_\_, the responsible account officer for \_\_\_\_\_ have examined the foregoing report; that, to the best of my knowledge, information and belief, all statements of fact contained in all attached schedules are true and said report is a correct statement of the business and affairs of the above-named respondent in respect to each and every matter set forth therein during the period from January 1, 2005, to December 31, 2005, inclusive.

Name (Printed) \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

***ANNUAL REPORT  
WATER UTILITY  
2005***

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Line  
No.

COMPANY INFORMATION

1

(Exact name of utility)

2

(Mailing Address)

3

(City)

(State)

(Zip)

(County)

4

5 Unified Business Identifier (UBI) Number Telephone Number

6

Fax Number

7

E-mail or Web Address

8

Date Utility First Organized

9

Location of Books and Records

10

11 Method Of Accounting (Cash/Accrual)

12 Type of Business (Proprietorship, Partnership, C-Corp, LLC, S-Corp)

Name

Title

Principal Business Address

Telephone

Person to send correspondence:

13

14

Person who prepared this report:

15

16

Certified Water Manager: Certificate Number:

17

Emergency Response Personnel:

18

19

Managers, Officers & Directors:

20

21

Report of person(s) owning 5 percent or more of company.

Name

Ownership Percent

Principal Business Address

Telephone

22

Does the company have any affiliated interest transactions as defined above (person(s) owning 5 percent or more)

23

No, Please sign this page and no further action is required.

24

Yes, Please sign this page and request an Affiliated Interest Report.

\_\_\_\_\_ makes oath and says

(Name of officer)

that he/she is

(Official title of officer)

of

(Exact legal title or name of company)

that he/she has examined the foregoing annual report water utility and affiliated interest report; that to the best of his/her knowledge, information, and belief, all statements of fact contained in the report are true and the report is a correct statement during the period from and including January 1, 2005, to and including December 31, 2005.

(Signature of officer)

Date

**INCOME STATEMENT**  
For the Calendar Year 2005

Line No. (L)	Account Name (a)	Water (b)	Other (c)	Total Company (d)
<b>REVENUES</b>				
1	Operating Revenue Accounts	\$ _____	\$ _____	\$ _____
2	Miscellaneous Revenue Accounts	_____	_____	_____
3	Other Revenue Accounts	_____	_____	_____
4	Utility Operating Revenue (Add L1 thru L3)	\$ _____	\$ _____	\$ _____
<b>EXPENSES</b>				
5	Operating Expense Accounts	_____	_____	_____
6	Depreciation Expense	_____	_____	_____
7	Federal Income Taxes	_____	_____	_____
8	Utility Operating Expense (Add L5 thru L7)	\$ _____	\$ _____	\$ _____
9	Utility Operating Income (Loss) (L4 minus L8)	\$ _____	\$ _____	\$ _____
<b>OTHER INCOME AND DEDUCTIONS</b>				
Other Income:				
10	Interest & Dividend Income	\$ _____	\$ _____	\$ _____
11	Miscellaneous Nonutility Income	_____	_____	_____
12	Total Other Income (Add L10 thru L11)	\$ _____	\$ _____	\$ _____
Other Deductions:				
13	Interest Expense	\$ _____	\$ _____	\$ _____
14	Miscellaneous Nonutility Expenses	_____	_____	_____
15	Total Other Deductions (Add L13 thru L14)	\$ _____	\$ _____	\$ _____
16	Net Income (Loss) (Add L9 plus L12 minus L15)	\$ _____	\$ _____	\$ _____

**CUSTOMER COUNT SUMMARY**

Description (a)	Number at Begin Year (b)	New Services (c)	Number at End Year (d)	Temporary (e)
17 Total Unmetered	_____	_____	_____	_____
18 Total Metered	_____	_____	_____	_____
19 Total Master Metered	_____	_____	_____	_____
20 Total Customers	_____	_____	_____	_____

# COMPARATIVE BALANCE SHEET

For the Calendar Year 2004 & 2005

Line No. (L)	Account Name (a)	Year 2004 (b)	Year 2005 (c)
<b>ASSETS:</b>			
1	Utility Plant	\$ _____	\$ _____
2	Less: Accumulated Depreciation	_____	_____
3	Accumulated Amortization	_____	_____
4	Utility Plant Acquisition Adjustment	_____	_____
5	Net Utility Plant (Add L1 thru L4)	\$ _____	\$ _____
6	Special funds (Surcharges, Facility Charges)	\$ _____	_____
7	Cash	_____	_____
8	Customer Accounts Receivable	_____	_____
9	Other Assets (Specify) _____	_____	_____
10	Total Assets (Add L5, plus L6 thru L9)	\$ _____	\$ _____
<b>EQUITY CAPITAL AND LIABILITIES:</b>			
11	Capital Stock Issued	\$ _____	\$ _____
12	Other Paid In Capital	_____	_____
13	Retained Earnings	_____	_____
14	Proprietary Capital	_____	_____
15	Total Equity Capital (Add L11 thru L14)	\$ _____	\$ _____
<b>Interest Rate</b>			
16	Long-Term Debt _____	\$ _____	\$ _____
17	Accounts Payable _____	_____	_____
18	Current Debt _____	_____	_____
19	Contributions In Aid Of Construction (CIAC)	_____	_____
20	Less: Accumulated Amortization Of CIAC	_____	_____
21	Other Liabilities (Specify) _____	\$ _____	\$ _____
22	Total Liabilities (Add L16 thru L21)	\$ _____	\$ _____
23	Total Equity Capital and Liabilities (Add L15 & L22)	\$ _____	\$ _____

## WATER SUMMARY

	Annual Water	Cubic Feet
24	Purchased or Ground Water	_____
25	Loss or Wastage	_____
26	Sold to Customers	_____

## EMPLOYEE SUMMARY

	Year 2004	Year 2005
	Full Time Count	Full Time Count
	Part Time Count	Part Time Count

CONVERSION: 1 cubic foot = 7.48 gallons



**Contributions in Aid of Construction  
(CIAC)**

Report below all plant, equipment, and monies received during the year.

Please report for each type of charge the company has.

If needed, use additional sheets.

Line

No.

(a)

(b)

(c)

(d)

**Surcharge**

1 Docket Number

2 Date Authorized

3 Date Expires

4 Current Year Collected \$

5 Current Year Collection Amount \$

Monthly Rate

Loan Amount

Remaining Loan

\$

\$

\$

**Facilities Charge**

6 Docket Number

7 Date Authorized

8 Date Expires

9 Current Year Collected \$

10 Current Year Collection Amount \$

Rate

Loan Amount

Remaining Loan

\$

\$

\$

**Service Connection**

11 Docket Number

12 Date Authorized

13 Date Expires

14 Current Year Collected \$

15 Current Year Collection Amount \$

Rate

Loan Amount

Remaining Loan

\$

\$

\$

16 Other Current Year Collection Amounts \$

**Annual Total CIAC Collected**

17 (Add L5 , L10, L15 & L16) \$

# REGULATORY FEE CALCULATION SCHEDULE

Company Name \_\_\_\_\_ Annual Report Year 2005

In accordance with RCW 80.24.010 "Regulatory Fees", the Commission requires Water companies (Class A & B) to file reports of gross intrastate operating revenue and pay fees on that revenue. Every company subject to regulation shall file with the Commission a statement under oath showing its gross intrastate operating revenue from operations for the preceding year and pay to the Commission a fee as instructed below.

1	Total Gross Intrastate Operating Revenue **	1	\$
2	Less Non Fee-Paying Revenue	2	\$
3	Balance-Adjusted Gross Intrastate Operating Revenue (subtract line 2 from 1)	3	\$
4	Regulatory Fee Calculations:	4	
4a	If line 3 is <b>UNDER</b> \$20,000, Enter <b>ZERO</b> (Filing <b>ZERO</b> indicates schedule is complete)	4a	\$
4b	If line 3 is <b>BETWEEN</b> \$20,000 and \$50,000-enter amount from line 3 (Filing <b>BETWEEN</b> \$20,000 and \$50,000 indicates schedule is complete. If filing after May 1st go to Line 6)	4b	\$ x .001 (.1%) = \$
4c	If line 3 is <b>OVER</b> \$50,000-enter amount from line 3	4c	\$
4d	<b>First</b> \$50,000 is subject to .1% regulatory fee	4d	\$ 50,000.00 x .001 (.1%) = \$
4e	Adjustment of Gross Intrastate Operating Revenue (subtract Line 4d from 4c)	4e	\$ x .0019 (.19%) = \$
5	Total Regulatory Fees owed (enter line 4b, or add 4d and 4e)	5	\$
		Agency Use Only	001-111-02-68-160-01
<b>Complete Lines 6 through 9 if filing after May 1</b>			
6	Penalties on Regulatory Fees filed after May 1	6	
6a	Total Penalties on Regulatory Fees owed - enter amount from line 5	6a	\$ x .02 (2 %) = \$
7	Interest on Regulatory Fees filed after May 1	7	
7a	Amount from line 5 _____ x Number of months past May _____ x .01 (1%) =	7a	\$
8	Total Penalties and Interest owed (add lines 6a and 7a)	8	\$
		Agency Use Only	001-111-02-68-160-11
9	Total Regulatory, Penalty and Interest Fees Due (add lines 5 and 8)	9	\$

\*\* Note: Gross Washington intrastate operating revenue is defined as all revenue collected for the year from rates under tariffs, and contracts on file at the Washington Utilities and Transportation Commission. The revenues subject to the Commission's regulatory fees are gross Washington intrastate operating revenues before deductions for uncollectibles, unbillables or the payment of state and federal taxes, i.e. "Gross Revenues" means before any deductions from Revenue Receipts.